UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND 11/1521793						
1 Date of Request: 2 Serial/					1759	700
3 Please refund the following fee(s):		4 PAPER NUMBER		5 DATE FILED	6 AMOUNT	
	Filing					\$
	Amendment					\$
	Extension of Time					\$
	Notice of Appeal/Appeal					\$
	Petition					\$
	Issue					\$
	Cert of Correction/Terminal	Disc.				\$
	Maintenance					\$
	Assignment	· · · · · · · · · · · · · · · · · · ·				\$
	Other					\$
			7 TOTAL AMOUNT OF REFUND 983\$822598			
			8 TO BE REFUNDED BY: \$500.00			
10 REASON:				T	reasury (Check
	Overpayment			C	redit Der	posit A/C #:
	Duplicate Payment			9		
	No Fee Due (Explanation):					
				_		
·						
11 REFUND REQUESTED BY:						
TYPED/PRINTED NAME:		TITLE:				
SIGNATURE:		· · · · · · · · · · · · · · · · · · ·	02 FORHONE: -500.00 OP			
OFFICE: ***********************************						
APPROVED:			DATI	E: _	•	·

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B